

| | Type of Statement | | | | | |
|--|--|-------------------------|--|--|--|--|
| ▼ NEW | □ AMENDED | | | | | |
| This committee is registering with the Virginia State Board of Elections for the first time. | This committee is filing an amended Statement of Organization. | | | | | |
| RC-19-00005 | Date Changes Took Effect | SBE-issued Committee ID | | | | |
| Name of Committee | | | | | | |
| Citizens for Affordable Courthouse A Full Name of Committee CFA-CA Committee Acronym (if applicable) | | | | | | |
| C | Committee Mailing Address | | | | | |
| 29391 Rivermont Dr. | | | | | | |
| Street Address/PO Box | | Suite # | | | | |
| Meadowview | VA | 24361 | | | | |
| City | State | Zip Code | | | | |
| ecopenhaver@naxs.com | | (276) 944-3227 | | | | |
| Email Address | | Business Phone | | | | |
| Committee Website | | | | | | |
| Afi | filiated Organization or PA | $\overline{\mathbf{c}}$ | | | | |
| ☐ Check this box if this committee is affiliated with another organization or PAC. If so, provide the following information: | | | | | | |
| Full Name of Affiliated Organization | | | | | | |
| Street Address/PO Box | | Suite # | | | | |
| City | State | Zip Code | | | | |
| Relationship of this Committee to Affiliated Orga | nization | | | | | |



| Area, Scope and Jurisdiction of the Committee | | | | | | |
|--|----------------------------------|--------------------------------|-------------------------------|----------|--|--|
| Remove courthouse to Towne Center Drive | | | | | | |
| Referendum Purpose – Briefly describe the subject of the referendum 11/07/2019 | | | | | | |
| Date of Referendum | | | | | | |
| Scope of Referendum: | | | | | | |
| ☐ Statewide | | | | | | |
| ▼ Local (name of c | ounty/city/town: | Washington County | |) | | |
| ☐ Regional (describ | be the region: | | |) | | |
| Position on Referendum: | | | | | | |
| ▼ Support | | | | | | |
| □ Oppose | | | | | | |
| | | | | | | |
| | | Committee | Depository | | | |
| | _ | | | | | |
| Highlands Union Bank Name of Primary Financial Institution | | Name of Other Financial Ins | stitution (if applicable) | | | |
| Name of Frimary Financial Institution | | Traine of Other Financial Ins | sitution (if applicable) | | | |
| Abingdon | VA | | | | | |
| City | State | | City | State | | |
| | A | ddress Where Boo | oks are Maintained | | | |
| 29391 Rivermont Dr. | | | | | | |
| | | P.O. Boxes are not acceptable) | | Suite # | | |
| Maintained | Meadowvie | NA/ | VA | 24361 | | |
| | City | | State | Zip Code | | |
| Committee Activity | | | | | | |
| | | | | | | |
| Please provide the following | dates. (If an action | n has not yet occurred | for this committee, write "N/ | /A") | | |
| Date first contribution a | ution accepted: 09/30/2019 | | | | | |
| Date first expenditure m | enditure made: 09/30/2019 | | | | | |
| Date committee deposite | ory designated: | 09/30/2019 | | | | |
| Date treasurer appointed: 09/30/2019 | | | | | | |



| Treasurer | | | | | |
|--|---|---------------------------------|---|--------------------------|--|
| Treasurer Information | Copenhaver Salutation Last Name ecopenhaver@naxs.com Email Address | • | Edward Jr Middle Name Suffix 76) 944-3227 ytime Phone # | | |
| Treasurer Residential Address | 29391 Rivermont Dr. Street Address Meadowview City | VA State | Apt # 24361 Zip Code | | |
| Treasurer Business Address | 29391 Rivermont Dr. Street Address/P.O. Box Meadowview City Principal Custod | VA State ian of the Books | | Suite # 24361 Zip Code | |
| Principal Custodian Information | ☐ Check this box if the Principal Cu are the same person, skip this section | . John First Name | Edward Middle Name 276) 944-3227 aytime Phone # | Jr Suffix | |
| Principal Custodian Residential Address | 29391 Rivermont Dr. Street Address Meadowview City | Apt # VA 24361 State Zip Code | | | |
| Principal Custodian Business Address | 9391 Rivermont Dr. reet Address/P.O. Box Suite # Meadowview VA 24361 ty State Zip Code | | | | |



| Filing Method | | | | |
|--|---|--|--|--|
| Please indicate the method by which this committee will submit its campaign finance reports: | | | | |
| ☑ File electronically using SBE's VAFiling Application. | | | | |
| ☐ File electronically using an SBE Approved Vendor (Please indicate Name of Vendor:) | | | | |
| ☐ File paper reports. (By choosing this option, I affirm that this committee do of \$10,000 during the calendar year) | pes not intend to accept contributions or make expenditures in excess | | | |
| Signature | Date | | | |
| Statement of Treasurer | | | | |
| Definition of Referendum Committee: §24.2-945.1 "Referendum committee, that makes expenditures in a calendar year in excess of (referendum, (ii) \$5,000 to advocate the passage or defeat of a referendum held in a single court | i) \$10,000 to advocate the passage or defeat of a statewide ndum being held in two or more counties and cities, or (iii) \$1,000 to | | | |
| filing this form on or after October 1 and before the November elector the committees activities within 24 hours of filing its Statemen | 4.2-949.6 & §24.2-949.6 (D) requires any political action committee tion day in any odd numbered year (i) to file a campaign finance report t of Organization and (ii) to file reports within 24 hours of receiving the period between the date of filing its statement of organization and | | | |
| required by the Code of Virginia for late or un-filed reports. I also u | ode of Virginia). I understand that I must truthfully report all monies ds in a timely manner. Civil penalties will be assessed in the manner | | | |
| Signature | Date | | | |



Instructions for Completing This Form

General Guidelines

- 1) Referendum committees must submit the original, signed version of this form to the State Board of Elections at 1100 Bank Street, Richmond, VA, 23219. Facsimiles and copies will not be accepted.
- 2) This form must be written in ink or typed or it will be rejected.
- 3) All requested information on the form is required unless otherwise noted below.
- 4) An amended Statement is required to be filed within 10 days of the change if <u>any</u> of the information reported on this form changes. Failure to amend this form in a timely fashion may result in civil penalties of up to \$500 to be assessed according to the procedure described in the *Code of Virginia*.

Type of Statement

1) Check the box that applies to the type of Statement that you are filing.

Name of Committee

1) Please insert the full name of your committee. You may include the acronym but you must spell out all acronyms for you committee.

Committee Mailing Address

- 1) Insert the committee's primary mailing address.
 - *§24.2-952.1 states that referendum committee must have an address that is located within the boundaries of the Commonwealth.
- 2) Insert the committee's primary business phone and fax number.
- 3) Insert the Committee's e-mail address.
 - *This information is required if your committee intends to file electronically. Otherwise, it is optional.

Area, Scope and Jurisdiction

- 1) Indicate whether the committee is supporting or opposing the referendum in question.
- 2) Briefly describe the subject of the referendum.
- 3) Indicate the date of the referendum.
- 4) Indicate which locality in which the referendum is being held.

Committee Depository

- 1) Insert the name and address of the committee's depository (Bank Name).
- 2) Insert the name and address of the committee's secondary depository (if one).
 - *Depositories must be in an account located within the Commonwealth.

Affiliated Organizations

1) Indicate the name and address of any affiliated organization. Please attach additional sheets if the committee has more than one affiliated organization.



Instructions for Completing This Form (cont.)

Treasurer and Books Information

- 1) Treasurer
 - a) Insert the name and business and residential address of the person who will be responsible for maintaining and keeping accurate financial records and reporting these records on the prescribed forms.
 - *Note: The Treasurer must be a resident of the Commonwealth of Virginia.
 - b) Email Address

*Note: An email address for the treasurer is required if the committee intends to file electronically (see below for e-filing requirements). The email address is optional for all other committees.

- 2) Custodian of the Books
 - a) Insert the name and business and residential address of the custodian of the books (if one).

Filing Method

1) Indicate whether the committee intends to file <u>all</u> of their campaign finance disclosure reports electronically.

NOTE

*Referendum Committees that intend to raise more than \$10,000 or who intend to spend more than \$10,000 in a single calendar year are required by § 24.2-951.8 to file electronically.

- VAFiling Option
 - If you choose to file electronically, log into the following Web site address: https://cf.elections.virginia.gov
- Approved Vendor Option
 - If you choose to contract with a private company, SBE recommends that you use an "Approved Vendor." These companies meet SBE's standards for e-filing. Although you are free to use any company you wish, we cannot guarantee that the company you choose will comply completely with SBE's standards. As a result, your committee may end up paying penalties for incomplete, late or un-filed reports. For a list of "Approved Vendors" please visit our website: http://www.sbe.virginia.gov/